

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 10/634,718	FILED DATE
						APPLICANT(S)	
CLAIMS							
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	1		1				
2		1		1			
3		1		1			
4		1		1			
5		1		1			
6		1		1			
7		6		0			
8		1		1			
9		1		1			
10		1		1			
11		1		1			
12		1	X				
13		1		1			
14	0			0			
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TOTAL IND.	1		1				
TOTAL DEP.	1	1	1	1			
TOTAL CLAIMS	22		15				